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**FACSIMILE COVER SHEET**

TO: Examiner: Gary L. Laxton

FROM: Michael K. O'Neill

RE: U.S. Application No. 10/632,905  
Attorney Docket No. 00862.023174

FAX NO.: (703) 872-9306

DATE: April 12, 2005

NO. OF PAGES: 10  
(including cover page)

TIME: 4:41 p.m.

SENT BY: Gina Marie

**MESSAGE**

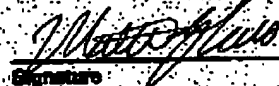
Attached are the following papers for the above-identified application:

1. Amendment and
2. Transmittal for Amendment.

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on 4/12/05

Date



Signature

Matthew Evans 56,530  
Name of person signing certificate**IF YOU DO NOT RECEIVE ALL THE PAGES  
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In re Application of:

HIROSHI KONDO, et al.

Application No.: 10/632,905

Filed: August 4, 2003

For: POWER CONVERTER AND ELECTRIC POWER  
GENERATOR

Docket No.

00862.023174.

Examiner: Gary L. Laxton

Group Art Unit: 2838

Date: April 12, 2005

Mail Stop A1  
THE COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

☒ No additional fee is required.

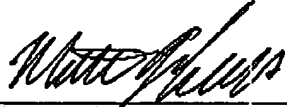
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12	MINUS	20	= 0	x \$25 \$50	\$0.00
INDEP. CLAIMS	2	MINUS	3	= 0	x \$100 \$200	\$0.00
Fee for Multiple Dependent claims \$180°/\$360						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.
- ☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
\_\_\_\_\_  
Matthew J. Evans  
Registration No.: 56,530

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Form #120

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